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THE CHILD

Monthly Bulletin

WITH
SOCIAL-STATISTICS SUPPLEMENT

Volume 7
July 1942—June 1943



United States Department of Labor, FRANCES PERKINS, *Secretary*

Children's Bureau, KATHARINE F. LENROOT, *Chief*

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*Wartime Increase in Child Labor and Youth
Employment*

U.S. DEPARTMENT OF LABOR
CHILDREN'S BUREAU



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UNITED STATES DEPARTMENT OF LABOR

FRANCES PERKINS, SECRETARY

CHILDREN'S BUREAU

KATHARINE F. LENROOT, CHIEF

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WE ARE fighting again for human freedom and especially for the future of our children in a free world. Children must be safeguarded—and they can be safeguarded—in the midst of this total war so that they can live and share in that future.—*A Children's Charter in Wartime.*

SAFEGUARDING THE HEALTH OF MOTHERS AND CHILDREN

Protection of Children in Danger Zones¹

BY MARTHA M. ELIOT, M. D.,² *Associate Chief, Children's Bureau, and* KATHERINE BAIN, M. D.,
Director, Division of Research in Child Development

PLANNING for the protection of children from danger coming from outside the borders of a country is a new experience to many countries, particularly in this hemisphere. There have always been dangers within—disease, disaster, accident. But for meeting a physical danger which may come to a large part of our child population from outside, we have no precedent. Measures to meet such danger must be devised without the gradual ripening process which takes place in the usual slow order of progress. Almost overnight we are called upon to have ready facilities, personnel, and administrative machinery to meet situations as yet ill-defined and in all probability even unimagined. It is natural that we turn for guidance to those countries which in the last few years have experienced the effect of total war on the civilian population. From them we can learn some of the preparatory measures which should be taken and also learn to avoid some of the pitfalls.

Experience, however, has shown that warfare in this generation does not follow a set pattern and that the unexpected is to be expected. A specific technique or method which is effective in one country at one time may be inapplicable to another country at a different time. For example, from the experience of Spain it was thought that deep shelters were essential, yet the experience in British cities has been that deep shelters are to be preferred to home shelters only in overcrowded and poorly built areas.

Before September 1939 Britain expected that war would bring sporadic and short raids, and its whole system of civil defense was built on this expectation. After France fell and the Nazis obtained bases close to the shores of England, the tempo and character of raids changed. Then shelters intended for use for a few hours only were taxed to the utmost to accommodate many people for long stretches of time. Instead of temporary shelters they became places of abode, necessitating sleeping, eating, and toilet facilities.

Though a pattern of action cannot be taken over in toto from countries which have already experienced bombing, we can all profit by some of the lessons they have learned. The first of these, as evidenced by the British experience, is that all plans should be flexible, for, however carefully they are laid, events will disrupt them. Only by trial and error can plans be made to fit situations as they arise and as they change. The second major lesson which has become clear in reports coming from Great Britain, is that the maintenance of essential services—health, medical care, welfare, education, and recreation—is the first line of civilian defense.

The experience of other countries has shown that though many people leave zones which become dangerous, many others remain, some from choice and some from necessity. The maintenance of the life of a city depends on its civilian population. When mothers and fathers remain, some children will remain also, and it is for their protection that special plans must be made.

It is obvious then that the best preparation for danger is the extension of all the basic services for children. What a child needs in a danger zone is what he needs at any time in order

¹First part of paper presented at Eighth Pan American Child Congress, Washington, D. C., May 2-9, 1942; to be concluded.

²Dr. Eliot is a member of the Joint Committee on Evacuation. Two reports from this committee are being published by the Office of Civilian Defense, Washington, D. C., and will be available for administrative use by State and local officials: Bulletin No. 1, The Civilian Evacuation Program Policies and Principles; Bulletin No. 2, Planning for Evacuation and Reception Care.

to grow and develop, plus some specific protective measures. The remarkable health record of the bombed cities of Britain is undoubtedly due to their extensive health services, built up before the war. Any country, even though remote from the theater of war, will be forearmed if its children receive good medical supervision and care, are well nourished, and are immunized against the common contagious diseases.

Registration and Identification.

Whether children are to stay in a danger zone or to be evacuated, one measure for their protection is registration and identification. It is obvious that if evacuation is contemplated, a register of all children is fundamental in order to determine the magnitude of the problem. It is equally important to know and have a record of the inhabitants of all homes in a danger zone. If a block or an area is destroyed by fire or bombing, it is important to know who lived there and may have been lost. The wearing of identifying data by children will facilitate their return to their families if they become separated from their parents or injured during hostilities, especially if they are too young to supply the information themselves. A variety of means of identification have been devised; a simple and effective one is that used by the Army, which consists of an indestructible tag bearing certain pertinent data—name, address, and number when an appropriate numbering plan has been devised.

Protection in Schools.

As part of the family group the children share in the general measures taken for the whole population, but for a large part of the day the child is outside the family group. Schools, as an important part of the child's life, must continue and, of course, must be made safe. Though the temporary closing of schools while the community adjusts to a new situation may be necessary (this step was taken in London and in Hawaii), it is obvious that if children are to remain in a danger zone, school services must be maintained, and the London experience indicates that it would have been better not to close the schools or to open them immediately after the first move was made.

Detailed rules for the physical protection of children in schools cannot be laid down, for methods of protection depend on the construction and location of the school, extent of danger, and many other factors. Since the greatest number of injuries in a bombing occur to persons on the street, in general it is considered

advisable to keep children in school during raids if the building can be made reasonably safe. If the building is old and of poor construction, or close to a military objective, dispersal to nearby shelters or homes may be necessary. Dismissal of children to make their way home alone at the warning of danger is entirely unwarranted. Aside from the very great danger on the streets, the strain and shock to the child must be considered.

In making provision for care of children within the schools, attention should be given to their comfort as well as to their safety. Room to move about and to carry on activities is essential. Many teachers have been ingenious in providing for handwork, games, or group singing while a raid drill was in progress. Though some children were disturbed when air-raid drills were first instituted, especially if they were required to stand in crowded quarters, it has been found that as the children have become familiar with the procedure and as provision has been made for keeping them busy, fears have vanished and children now take a drill as a matter of routine.

For the child in the nursery school or the day nursery additional protective measures are necessary, for he needs more adult assistance. In some instances older boys and girls from the upper grades of the school have helped move the small ones. Additional adult personnel is necessary if small children are cared for in groups in danger zones.

Health Protection.

Medical care and hospital services for children, including beds for those with a communicable disease, should be maintained for children in any danger zone. Probably hospital services should be increased, for illnesses which ordinarily could be cared for at home may require hospital care when homes and utilities are disrupted.

Any public shelter, in addition to offering physical protection from bombing, should offer reasonable provision for comfort and for health protection. Overcrowding and lack of ventilation promote the spread of disease. There should be medical and nursing services available, and provision for obtaining food and for simple preparation for infants' feeding, such as warming bottles.

Importance of Food.

In any danger zone the problem of feeding the population requires special measures. The usual transportation facilities may be needed for military purposes; and as a result food supplies may

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become insufficient, or lacking in some elements. Often the women are engaged in defense activities and have not enough time for the preparation of meals. Homeless people have no way of cooking or of caring for food. If children are not to suffer, provision must be made for adequate food supplies, including safe milk and fresh foods, and for cooking and serving. The "wartime restaurant," "community kitchen," and "mobile canteen" have been devised to meet special needs. Workers trained in mass feeding under emergency conditions can adapt their skills to new situations as they arise. This implies storage of appropriate food supplies at strategic centers when needed.

What constitutes a good diet should be common knowledge of all citizens, but especially of those in danger zones. In the presence of shortages, the selection of an adequate diet requires knowledge and skill. A nutrition campaign to teach people food values, to awaken an interest in good nutrition, and to change any ingrained, injurious food habits should be among the early defense measures of a Nation.

Protection of Mental and Emotional Health.

In addition to health protection and protection from bodily harm, provision for the mental and emotional growth and development of children is a part of a total protection program. Persons trained in the care of children should not be diverted to more spectacular pursuits. Schools, nurseries, clubs, recreation groups, as they carry on their usual programs, will be an active force in the prevention of juvenile delinquency. In any danger zone there is an increased tempo of living, a feeling of excitement in the air, which tends to break normal barriers of restraint. Add to this the weakness of family ties due to the absence of the father in military service and to the mother's employment, and it is small wonder that delinquency rates increase in cities under bombing. Because employment possibilities have increased or because homes are destroyed and families scattered, the older child or adolescent is often "on his own" at an early age. Schools, clubs, recreation groups must become a partial substitute for family life and do much to restore a sense of security which the child so sorely needs.

Special Care for Young Children.

For young children special protective measures are needed. Where the employment of women is extensive there should be nurseries for children under school age. Nursery education should be part of the daily program of every nursery of this sort. Health supervision is of

paramount importance whenever young children are brought together in groups.

The principle of not separating infants from their mothers should be observed. Group care for children under 2 years of age has so many attendant dangers to health and well-being, that until all other measures are exhausted, it should not be adopted.

Maternity Care.

If protection is to be afforded all infants, it should extend back to the mother, during her pregnancy and in the weeks immediately following delivery. Maternity care in an area under bombing or in imminent danger of attack presents some major difficulties. Physicians and nurses are engaged with the casualties in the general population, or must be held in readiness for this service. Hospitals are full, or reserved for casualties. Transportation is difficult, so that the physician, nurse, or midwife may have difficulty reaching the home, and the home may be destroyed or in imminent danger. If it is possible to remove women from areas of danger to areas of comparative safety for delivery, the strain on the woman and on the medical and nursing personnel will be less than if the delivery must proceed in the midst of disrupted surroundings. Outside London there are now many maternity homes with near-by hostels or boarding homes where women go in the last weeks of pregnancy and where they remain until able to resume their duties. Such maternity homes are conducted under standards established by the Ministry of Health and are strictly supervised.

Role of Volunteers.

To maintain adequate services for the care and protection of women and children in danger zones will tax the professional personnel to the limit. The participation of volunteers only partially trained but acting under supervision will free many highly trained persons for wider fields. The use of volunteers does not mean the lowering of standards, but rather an enrichment of the program and ultimately leads to a wider community response.

Training volunteers for child care is part of the preparation for an emergency. Volunteers should be recruited from among persons able and willing to contribute sufficient hours to make their work effective. If some pay for services rendered is possible, more persons will be able to take training, higher standards of performance can be expected, and continuity of service will be maintained.

A Cooperative Plan for the Obstetric Care of Soldiers' Wives

In a Limited Area in the State of Washington

By PERCY F. GUY, M. D.,

Chief, Division of Maternal and Child Hygiene, Washington State Department of Health

In February 1941 a survey of the several military areas in the State of Washington showed that the Fort Lewis area was most acutely in need of aid for maternity cases occurring in the families of soldiers. The "Fort Lewis area" families reside in Pierce County (and the city of Tacoma) to the north, Thurston County (and the city of Olympia) to the south.

It was fortunate that an understanding ear was found at the Fort Lewis Station Hospital. A plan was developed, and within a few months there was an obstetric department at the Fort with a qualified obstetrician in charge. Under the plan prenatal care is given at the Fort by the Army medical service for women living near the Fort and in prenatal clinics for those living in other areas. Local physicians are paid for the medical care of these maternity patients at local hospitals approved by the State Department of Health.

A maternal and child-health committee was requested of each of the two county medical societies (Pierce and Thurston) and subsequently appointed. A \$25 fee for medical care during labor and the postpartum period was agreed upon in committee. Twenty-seven physicians in Pierce County and 10 physicians in Thurston County who applied to their respective maternal and child-health committees were appointed by the State health department. The patients select their physicians from this list.

A special all-inclusive rate of \$50 for 10 days' care was arranged with hospitals in Tacoma and Olympia.

A qualified obstetrician employed on a part-time basis by the State agency serves as obstetric consultant to the program in Pierce County. A qualified pediatrician serves as pediatric consultant to the program in Pierce County. Sick and premature infants born to mothers enrolled in the program are automatically the responsibility of this consultant.

The wives of soldiers and noncommissioned officers are eligible for service under the program.

Women are enrolled in the program by a medical-social worker who has her office in Tacoma and a branch office in Olympia. Most cases are referred to her from the Fort Lewis

obstetric department. She makes a financial appraisal and determines whether the soldier shall participate financially in the program and, if so, to what extent. The balance of the cost is paid by the State Maternal and Child Health Division from funds granted by the Children's Bureau under the provisions of the Social Security Act.

The local health department is notified as soon as a case is referred, and prenatal home-nursing visits are provided. Notice is also given of the day of discharge from the hospital, and no time is lost in starting postpartum home visits.

There is an air base, McChord Field, a few miles from Fort Lewis. Wives of soldiers stationed there are eligible for enrollment in the program. Women resident in Pierce County may receive prenatal care at either of the two county prenatal clinics. In Thurston County, where there are no prenatal clinics, the physician is paid a \$10 fee for complete prenatal care.

The case load averaged 10 per month for the first 6 months following the inception of the program on August 1, 1941. It was running more than 30 per month by May 1942.

The plan has developed step by step and before this is published it is likely that the program will have been extended to other areas of the State and medical care and hospitalization made available to all infants under 1 year of age in soldier's families.

The babies born to the mothers cared for under this program are nearly all first babies. Most of the mothers are living among strangers. Most of them feel the effects of the housing shortage in the area.

The handling of miscarriages has not been satisfactorily worked out as yet.

As would be expected, the soldiers and their families like this program. The Army is enthusiastic about it. The program is very welcome to local official and nonofficial agencies aiding soldiers' families directly or indirectly. Many requests have been received from other military areas in the State for expansion of the program. Expansion will occur when and if funds are available.

Medical and Hospital Obstetric and Pediatric Care for Wives and Infants of Men in Military Service

The State and Territorial Health Officers, meeting on March 27, 1942, recommended that State health agencies develop plans to finance from maternal and child-health funds the medical and hospital obstetric and pediatric care needed by the wives and children of men in military service unable to purchase such care.

The Children's Bureau made the following suggestions to assist the State agencies in drafting workable eligibility determinations and authorization procedures, establishing standards of medical and hospital care, and simplifying methods of payment for care:

1. Eligibility.

All expectant mothers in the State, irrespective of legal residence, who state that the father of the expected child is in military service (United States Army or United States Navy, including Marine Corps and Coast Guard) and not a commissioned officer, should be eligible for obstetric medical and hospital services provided under the maternal and child-health program, without cost to the family, whenever to the knowledge of the State health agency such medical and hospital services are not otherwise readily available to the patient. Any child under 1 year of age whose father is in military service, but not a commissioned officer, should be eligible for pediatric medical and hospital care under the maternal and child-health plan. (Note: "Under 1 year of age" is suggested since the funds now available are insufficient to provide care for all children in these families.)

2. Authorization.

[A recommended form, "Application for Authorization for Medical and Hospital Maternity Care," was submitted to the States along with recommendations for simplified authorization procedures.]

3. Standards of Medical Care.

Medical care provided under the plan should be authorized by the State health agency only when the attending physician is licensed to practice in the State and is a graduate of a medical school approved by the Council on Medical Education of the American Medical Association. Prenatal care should be of a quality comparable to that recommended in the Children's Bureau publication, *Standards of Prenatal Care*. Obstetricians and pediatricians who are certified by

the American specialty boards, or whose training and experience meet the requirements of such boards, should be appointed as consultants by the State health departments and, whenever possible, be made available for consultation with the general practitioners participating in the plan.

4. Standards of Hospital Care.

Hospital care should be authorized only in hospitals that either have been approved by the American College of Surgeons or have been inspected and approved by the State health agency as meeting the standards of an obstetric and pediatric service established by the State health agency. A minimum of 10 days' hospital care after delivery should be authorized.

5. Medical and Hospital Care.

Payments should be made to the attending physician by the State health agency upon the receipt of the completed maternity or pediatric record on forms prepared by the State health agency for the use of the attending physicians.

Where the case load is concentrated in certain areas the employment of qualified obstetricians and pediatricians on a full-time or part-time basis would assure high standards of medical care. Payment on a salary basis would eliminate the difficulties of fee schedules.

Hospital care that has been authorized by the State health agency should be paid for at the per diem cost rate of each approved hospital. The per diem cost rate for maternity care should include all costs of care while mother and newborn infant are in the hospital, including delivery room, laboratory services, drugs, and so forth, except the medical services of the attending physician. Pediatric care would also be paid for on a per diem cost basis. Payments should be made to the hospital upon receipt of record showing the date and hour of admission and discharge of each patient for whom care was authorized by the State maternal and child-health director.

* * * * *

Many of the State health agencies are submitting to the Children's Bureau descriptive plans and budgets for the establishment of this type of service under their maternal and child-health programs for the fiscal year beginning July 1, 1942.

• CHILD WELFARE SERVICES •

Ascertaining Day-Care Needs

BY EMMA O. LUNDBERG

*Consultant in Social Services for Children
United States Children's Bureau*

A plan for a community day-care program should have as its foundation careful study of the present and prospective industrial needs in the community affecting the employment of women, with special reference to the actual need for the work of women who are mothers of young children. Information obtained through a survey should be related specifically to the objective of the community's concern about day care—making it possible for mothers to be employed if their work is essential for war production and safeguarding the health and welfare of their children. Any implications that the survey is a means of recruiting mothers for industry should be guarded against carefully. Provision of day-care facilities, no matter how excellent in quality, will not offset the harm done to children by depriving them of care by their mothers in their own homes. This basic principle of child welfare should guide the plans for the community survey.

A survey of day-care needs must go much deeper than a mere inquiry to the number of children whose mothers are now employed or the probable number of children whose mothers may be working at some time in the future. In some defense areas, where there is clear indication of immediate needs, such general information may provide sufficient basis for establishment of some urgently needed facilities. But a comprehensive community plan for day care must take into account many complex factors such as family situations and the needs of individual children. Children of school age as well as preschool children must be included. Day-care facilities must be so located that they will be available to the mothers who need these services.

In cities and in many nonurban areas certain types of resources are already available, and a fact-finding survey should determine first the extent to which existing resources can be equipped to meet the needs of children of employed mothers. Plans for establishing additional facilities should take into account the more or less temporary nature of some types of

need, so that when the war emergency is over the community will not find itself burdened with the support of institutions which served an immediate and urgent purpose but which may no longer be required. A distinction should be made between services of an emergency nature and those which should be provided in the community on a permanent basis. The urgency of certain measures because of war conditions serves to emphasize the neglect in many communities of provision for recreation, kindergarten and nursery-school training, and comprehensive programs of out-of-school activities. On the other hand, group care of children in day-care centers will be needed during the emergency to an extent far beyond the requirement for such provision in normal times.

The fact-finding survey in any locality should be made within a limited period of time so that the information obtained may serve as the basis for definite community planning. The initial survey should not, however, end the inquiry into day-care needs. Study of the situation in the community must continue as long as war production needs require the employment of women with household responsibilities. State and local defense councils or other organizations responsible for community planning must keep informed of changing conditions in industry which may affect the employment of women. Constant vigilance is needed to assure proper day care and to control the growth of commercialized nurseries which will spring up if adequate facilities are not provided by the community. Counseling service which provides information, advice, and assistance to working mothers will be the best barometer of specific day-care needs, and such service should be made available as soon as it becomes evident that employment of mothers may make it necessary to provide for day care of children.

Planning of the survey and interpretation of the findings should be the work of a small group of competent persons. Fact finding requires the services of men and women who have a background of experience in dealing with individuals

and groups and who understand the implications of the study. The quality and adequacy of existing facilities should be evaluated by persons who have expert knowledge of the equipment and standards required for the various types of day-care services.

In addition to summaries of information and compilation of data showing the extent of the need and the types of service required, a concrete picture of the situation may be obtained from spot-maps which show the location of existing resources for the care and supervision of children of preschool age and children of school age and the location of the homes of individual children who need care because of employment of their mothers. Day-care facilities should be so located that they will be readily accessible to the homes of the families needing such service.

Many war production industries draw workers from a large area; this is true of those near large cities as well as those located in small centers of population. Often a considerable number of the workers in an industry live in nearby cities in other States. For this reason it is desirable that the day-care committee of the State defense council or other appropriate agency shall be responsible for coordination of surveys conducted in the various communities of the State and shall establish a method of exchanging information affecting various communities of the State and adjacent States.

GENERAL INFORMATION PRELIMINARY TO THE SURVEY

As a preliminary to the community fact-finding survey it may be desirable to obtain certain general information and concrete illustrations of the need for day care which will serve as a background for the detailed study and will furnish material required to arouse public interest in the problem. Through interviews with persons who come in contact with various phases of the problem a general picture should be obtained of the need for care of children whose mothers are employed, opinions as to steps which should be taken to provide adequate care, and forecasts of future needs. Case stories should be gathered which will show the needs in terms of individual families and children.

There are a number of sources from which such information may be obtained:

1. Men and women who know labor conditions and family and neighborhood problems from the point of approach of the workers themselves.
2. Employers and employment agencies.
3. Heads of family-welfare and child-welfare agencies, and individual staff members

who may know the problem of day-care needs.

4. Health agencies, visiting nurses, and others who know the conditions under which families live.
5. School principals or teachers in sections of the city in which working people live.
6. Directors of day nurseries, nursery schools, play groups, recreation centers, and other persons acquainted with present resources and needs for day-care facilities.
7. Heads of settlements or neighborhood houses.
8. Other "key people" who may be conversant with the problem.

The list of persons and agencies to be interviewed should be compiled with the advice and assistance of the central planning group, the council of social agencies, and other appropriate organizations in the community.

SUGGESTED FORMS FOR FACT-FINDING SURVEY

In a large number of communities committees concerned with planning day-care facilities required because of employment of mothers in defense areas have already undertaken more or less comprehensive studies of needs and resources, and in at least two States a central committee has prepared material for the guidance of local communities in making studies of the need for day care.¹ Many of the studies which have been carried on up to this time have been preliminary to more inclusive or more detailed surveys or have covered special phases of the problem.

In response to numerous requests for schedules, the Children's Bureau has prepared a series of forms containing suggested items that appear to be of importance in ascertaining the extent of the need for day care of children of mothers employed in defense industries, the present resources for day care, and the facilities required in the community. The forms will be made available to State or local committees who may wish to utilize these suggestions in planning local surveys. Obviously all communities are not faced with the same situations, and it is necessary to adapt to local conditions not only the methods of making such studies but also to some extent the content of the forms.

¹ The Committee on Health, Welfare, and Recreation of the New Jersey State Defense Council has issued a "Plan for a Community Survey of the Needs for Day Care of Children of Working Mothers," adapted to that State. This material was prepared by the New Jersey Department of Institutions and Agencies, Trenton. The Committee for Child Care, Development, and Protection of the New York State Council of Defense is issuing a bulletin which includes a section on Facts to be Secured in a Community Survey of Need for Day Care. This bulletin was prepared jointly by the State departments of education, health, labor, mental hygiene, and social welfare.

Although a survey in a small city or a non-urban area would differ in many respects from a study of the situation in a large city in which there are many existing or potential resources for day care, the same general principles apply to all types of areas. Specific information should be obtained in regard to children, whether of preschool age or of school age, who may require the various kinds of services, and plans for providing the services needed should not be circumscribed by the resources which are now available or which may appear to be readily attainable in the particular community. No single type of care will meet the needs of all children in any area.

The following forms are suggested for a comprehensive community survey of day-care needs and resources:

Form 1. Schedule for obtaining information on present and prospective employment of women; employment policies.

Basic industrial information should preferably be obtained by the State defense council, the State welfare department, or other appropriate State agency and furnished by it to the local community or communities affected.

Information might be obtained from the following:

- United States Employment Service—State and local offices.
- War Manpower Commission—regional offices, State and local defense councils.
- Industrial plants.
- Training classes for war production workers.
- Housing authorities.
- Labor organizations.
- Other State or local sources of information regarding employment in war production industries and in other occupations.

Form 2. Questionnaire for employed mothers of young children and mothers who expect to be employed.

In preparation for distribution of the questionnaires there should be widespread publicity to acquaint parents with the purpose of the inquiry.

This questionnaire should include information to be obtained from employed women who are mothers of children under 16 years of age and from mothers who expect to be employed in defense industries or in other essential occupations. The questions should be stated in as simple form as possible.

The questionnaires should be distributed and collected through the day-care survey committee and should be filled out by the women themselves.

The information obtained should be analyzed not only from the point of view of data showing the extent of the need for day care, but primarily for the purpose of determining desirable locations of day-care centers, the practicability of foster-family day care and service

in the home, and the need for facilities for before-and-after-school care by public and parochial schools, recreation centers, neighborhood houses, day camps, and other possible sources of such care outside of regular school hours and during vacations.

Five sources of information are suggested:

(a) Industrial plants and other establishments where women are employed. The questionnaires should be distributed to employed women by representatives of the fact-finding organization and returned in sealed envelopes. It is desirable to avoid any implication that the information given will affect their employment.

(b) Training classes for war production workers.

(c) Trade unions and other organizations of workers.

(d) Schools, including nursery schools, play schools, kindergartens, grade schools, junior high schools, high schools, and vocational schools. The questionnaires should be given to the children to be taken home and filled out by the parents and returned to the teachers.

(e) Housing developments, especially those in industrial areas.

The items included in Form 2 might be utilized also by day nurseries, nursery schools, play centers, family and child-welfare agencies, neighborhood houses, and other organizations receiving applications for day care or inquiries in regard to resources. It might also be used for entering factual data by persons who interview mothers in the office of the counseling service or in agencies giving such service. Collection of information from these sources should continue after the completion of the community survey, in order that current information may be obtained throughout the continuance of special need for day care.

Forms 3-8. A series of schedules for obtaining information regarding existing resources for day care and supervision of preschool and school-age children, the practicability of expanding these resources.

These schedules should provide also for obtaining information in regard to the practicability of developing various types of services needed for the care and supervision of children:

3. Resources for group care of young children.
4. Day care in foster-family homes.
5. Trained service for care of children in their own homes.
6. Directed activities for school children—public and parochial schools.
7. Directed activities for school children—other than in schools.
8. Counseling service.

In areas where there are a number of day nurseries, nursery schools, and other centers providing various types of foster day care and activities for school-age children it may be desirable to obtain specific data from these agencies through the use of a questionnaire to be filled out by them which includes the factual items on these schedules. Evaluation of the quality and adequacy of service should be made only by persons whose experience equips them to make such studies.

State and Local Committees Planning Day-Care Programs

Late in May 1942 the Children's Bureau asked the State welfare departments for information regarding progress in State and local planning for day care of children whose mothers are employed in defense areas. By the middle of

June replies had been received from 42 States and from Alaska, Hawaii, and Puerto Rico. The following summary indicates that definite steps have been taken to deal with the problem constructively in many States and in a large

number of local communities where war industries have created a definite need for day-care facilities or where such need is anticipated in the near future.

State advisory committees on day care have been organized in 19 States and Hawaii, and there appears to be immediate prospect of advisory committees in 6 States—a total of 25 States.

In 10 of the 19 States the committee concerned with day care is a subcommittee of the State defense council. It is probable that this plan will be followed in most of the States now considering organization of committees.

The advisory committee on day care was appointed by the State welfare department in 8 of the 18 States, and in 1 State by joint action of the welfare department and the education department. At least three of these committees are closely related to the State defense council.

The day-care groups that are subcommittees of the State defense council include in their membership representatives of the State departments of welfare, education, and health in all cases and the department of labor in some cases. Usually there are additional members representing voluntary activities concerned with child welfare. Five of the committees formed by the State welfare department are similarly representative of official and citizen interests.

The 42 States from which reports were received listed a total of nearly 300 areas (usually cities or counties) in which war production has created special need for day care of children of employed mothers.

The reports showed that 28 of the State welfare departments from which information was obtained are assisting local communities in studying the day-care needs and planning activities. A special worker has been added to the welfare department staff in 6 of these States, and in 7 States the department is definitely planning to assign a full-time worker to the day-care problems. In all the foregoing States and in 15 additional States various members of the staff of the welfare department, particularly child-welfare-service regional consultants or supervisors, are devoting considerable time to helping localities organize day-care programs.

A total of 81 local areas have organized special day-care committees; 38 of these committees are definitely related to the local defense councils. In 28 areas the need for community provision for day care is under discussion by organizations other than special day-care committees.

Studies of the need for day care have been completed or are under way in 119 communities, and 9 communities are planning such studies.

The reports indicated that at least 44 communities have taken some steps to make counseling service available to employed mothers. In most instances this service is still at an experimental stage, but some of the reports stated that plans were being made to provide centralized service for mothers who need advice in regard to employment or assistance in arranging for the care of their children.

E. O. L.

Servicemen's Dependents Allowance Act of 1942

77th Congress, Public Law 625

On November 1, 1942, the children of servicemen will become entitled to allowances, paid jointly through contributions from the Federal Government and through deductions from their father's salary. Under the Servicemen's Dependents Allowance Act of 1942, approved June 24, family allowances are payable for any period that the men were in the service, on or after June 1, 1942. No payments will be made until after November 1, 1942, but at that time sums that have accrued between June 1 and November 1 will also be payable. The act applies to dependents of men in the four lowest grades—private, private first class, corporal, and line sergeant in the Army; nonrated men and third-class petty officers in the Navy, Marine Corps, and Coast Guard.

The allowance is \$62 a month if there is a wife and one child and \$10 for each additional child; if there is no wife, the allowance is \$42 for one child, and \$10 for each additional child. Additional but smaller allowances are authorized for dependent grandchildren, brothers, and sisters. Wives and parents are also provided for.

The terms child, grandchild, brother, and sister, are limited to unmarried persons who are under 18 years of age and to those of any age who are incapable of self-support because of mental or physical defects. The definition of child includes a legitimate child; an adopted child; a step-child; and an illegitimate child in cases in which the father has acknowledged the

child, or in cases in which the man has been ordered by the court to support the child or decreed by a court to be the father of the child.

The act is to be administered by the Secretary

of War in its application to men in the Army and by the Secretary of the Navy in its application to men in the Navy, Marine Corps, and Coast Guard.

Recent Children's Bureau Publications

Children's Bureau Commission on Children in Wartime

A report of the first meeting of the Children's Bureau Commission on Children in Wartime, March 16-18, 1942, has been issued by the Children's Bureau in mimeographed form (Washington, April 1942, 122 pp.) and single copies are available for limited distribution.

The organization and membership of the Commission, the action recommended by the Commission, addresses given at the meetings, factual material submitted to the Commission and summaries of the discussion are contained in this report. The factual material covers a wide variety of subjects—psychological disturbances in children, economic security for children in wartime, child labor in wartime, principles on use and protection of young workers in wartime, civil protection of children, needs of children in defense areas, maternal and child health in wartime, social services for children in wartime, role of State schools for girls in a community program for social protection, and day care for children of working mothers in defense areas.

Day Care Standards

The report of the Subcommittee on Standards and Services for Day Care authorized by the

Children's Bureau Conference on Day Care of Children of Working Mothers, held July 31 and August 1, 1941, has been issued by the Children's Bureau under the title, "Standards for Day Care of Children of Working Mothers" (Children in Wartime No. 3, Bureau Publication No. 284, Washington, 1942, 20 pp.). The committee believes that the standards here set forth not only are desirable standards for day care of children, whether public or private, free or pay, all-day or part-day, under home, school, public-health or social-service auspices, but are also possible standards for the services that should be set up in defense areas.

New Poster Series

A series of 17 posters under the general title, "Better Care for Mother and Child," has been issued by the Children's Bureau. The posters are based on Bureau Publication 278 of the same name and are in the form of pictographs. They are in black and white and measure 22 by 10½ inches each. Agencies and organizations engaging in or administering health services for mothers and infants can obtain this set of posters without charge by writing to the Children's Bureau; others may purchase the posters at 5 cents each (85 cents per set) from the Superintendent of Documents, Government Printing Office, Washington, D. C.

BOOK NOTES

EFFECT OF WAR CONDITIONS ON CHILDREN AND ADOLESCENTS IN THE CITY OF HARTFORD, CONN. Report of a survey by Helen D. Pigeon. Connecticut Child Welfare Association, 85 Whitney Avenue, New Haven, Conn. 40 pp. Processed. In Hartford, a war production area, the need is shown for a comprehensive program of day care for children, protective police services, and increased activity on the part of public and private agencies supplying protective measures, treatment facilities, and recreational opportunities.

LET'S MAKE A STUDY. Community Chests and Councils, 155 East Forty-fourth Street, New York. 1942. I, The

use of research by community chests and councils of social agencies in planning the community program of welfare, health, and recreation service (Bulletin 114-A, 53 pp.). II, Statistical Aids (Bulletin 114-B, 48 pp.).

A GUIDE FOR WARTIME PLANNING FOR CHILDREN, by Marshall Field. National Citizens Committee, White House Conference on Children in a Democracy, 122 East Twenty-second Street, New York. 14 pp. This is an address delivered at the Colorado White House Conference on Children in a Democracy, March 19, 1942.

• YOUNG WORKERS IN WARTIME •

Wartime Increase in Child Labor and Youth Employment

PREPARED BY INDUSTRIAL DIVISION, CHILDREN'S BUREAU

Child labor is increasing—on every hand there is proof of a growing pressure for the use of children in industry, in trade, in service work, in agriculture, and in the many miscellaneous occupations which are being vacated by older youth who are finding opportunities for more desirable jobs. Employers whose long-time policy has been to use no workers under 18 years of age have lowered their limits to 17 or to 16 years. Inevitably, at the same time, boys and girls of 14 and 15 years, and even younger, are obtaining jobs—some in violation of the laws which have been passed to protect them from premature and undesirable employment.

The employment of children and youth has been rising steadily since 1939, though that year showed a decrease from each of the 2 previous years. It has risen most sharply in the past 2 years. In States where comparable legal restrictions existed during 1941 and 1940, the number of certificates issued for children 14 and 15 years of age, permitting them to leave school for work, increased 80 percent in 1941 as compared with 1940. The number of certificates issued for children going to work outside school hours or during vacation increased 75 percent. These numbers have continued to mount in 1942. In the first 3 months of this year nearly 50 percent more children of 14 and 15 years obtained certificates for work, either full time or outside school hours, than in the first 3 months of 1941.

For youths of 16 and 17 these increases have been even greater. In 1941 the number of 16- and 17-year-old youth certificated for employment was more than 100 percent larger than in 1940. In the first 3 months of 1942 the number increased 100 percent over the corresponding period in 1940—in round numbers, 80,000 compared with 40,000.

Figures of the United States Employment Service show the same trend both for 14- and 15-year-old and for 16- and 17-year-old boys and girls. In 1941 public employment offices

throughout the country placed 76 percent more children under 16 than in 1940, and 85 percent more boys and girls of 16 and 17 years. At the beginning of 1942 a change was made in the reporting system, so that the figures for 1942 are not directly comparable with those for previous years.¹ However, rough comparisons are possible, which indicate a gain of at least 80 percent in placements of children under 16 during the first 3 months of 1942 as compared with the same period in 1941, and a corresponding increase of at least 60 percent in placements of 16- and 17-year-old minors.

This picture of increase in child labor and youth employment as shown by placement and employment-certificate figures, startling as it is, is far from a complete view of the facts. Employment certificates are not required for all types of work or for all boys and girls under 18 years of age going to work. Many children are finding jobs through their own efforts or through friends, and not through placement officers.

Moreover, by their very nature, these reports do not take into account illegal employment. This is a significant lack because, with the sharp rise in employment of young workers that places a further burden on already overburdened labor-law enforcement officials, there has come a rise in violations of both State and Federal child-labor laws. State labor officials in many parts of the country are reporting an increased tendency to violation of State child-labor standards and need for greater and greater vigilance to maintain legal safeguards for young workers.

Reports of the Children's Bureau of the United States Department of Labor, the Federal agency having the responsibility for administration of the child-labor provisions of the Fair

¹ Placement statistics after January 1, 1942, exclude agricultural placements, which were included prior to that date, and include so-called supplementary placements, in which the Employment Service takes only part of the steps necessary to a complete placement, which were previously excluded. As there are few of these latter placements in nonagricultural industries, it is safe to assume that the increase was at least as great as shown by a comparison of the statistics for the 2 years and may have been considerably greater.

Labor Standards Act of 1938,² show a decided increase in the extent of illegal employment under the Federal act. In the year ended June 30, 1941, when the shift of adult labor to intensified production of war materials had already

²These standards set for establishments shipping goods in interstate commerce a 16-year minimum age for general employment with limited exemptions for minors of 14 and 15 years in nonmanufacturing and nonmining occupations under conditions determined by the Children's Bureau not to interfere with school, health, or well-being; in addition, minors 16 and 17 years of age may not be employed in occupations found by the Chief of the Children's Bureau to be particularly hazardous or detrimental to their health or well-being. The following are exempted: Children under 16 employed by their parents in nonmanufacturing and nonmining occupations, children in agriculture during periods when they are not legally required to attend school, and child actors.

opened up many new employment opportunities for youth, approximately one-third more minors were found to be employed contrary to the child-labor provisions of the act than in the previous year. In the 10-month period from July 1, 1941, to April 30, 1942, according to preliminary figures, more than 100 percent more minors were found employed contrary to these standards than in the corresponding 10-month period of the previous year. Not only were more children found to be illegally employed in this latter period, but the number of establishments found with minors of the oppressive child-labor age employed also increased more than 100 percent.

BOOK NOTES

BARRIERS TO YOUTH EMPLOYMENT, by Paul T. David. American Council on Education, Washington, 1942. 110 pp. The purpose of this book is to assess the importance of certain institutional factors operating as barriers to the employment of youth and to consider the extent to which existing policies and practices should be revised to facilitate youth employment, both now and in future times of peace.

CHILD WORKERS IN WARTIME, by Gertrude Folks Zimand. National Child Labor Committee, 419 Fourth Avenue, New York. 1942. 23 pp. Single copies, 10 cents; 100 copies, \$7.50. Among the subjects discussed are the increase in child employment, legal and illegal; the exodus of boys and girls from high schools for jobs; proposals to lower legislative standards; and projects for recruiting young people for agricultural work.

• INTER - AMERICAN COOPERATION •

New Social Insurance Law in Costa Rica

Costa Rica is the latest addition to the growing ranks of American countries that have adopted systems of social insurance. A law of 1941, in operation since January 1942, requires insurance against the risks of illness, maternity, invalidity, old age, and death.

All workers under 60 years of age, whether in private or public service, in manual or mental work, whose annual income is below a specified amount, must be insured. This applies also to apprentices, industrial home workers, domestic servants, and persons working independently on their own account, such as small-scale manufacturers, merchants, artisans, and farmers, provided that they themselves work and employ not more than two persons.

The insured worker, his employer, and the State contribute specified amounts to the social-insurance fund of Costa Rica. In return the insured workers receive cash benefits and medi-

cal care in case of illness or childbirth and pensions in case of invalidity or upon reaching the age of 60 years. Payments are also to be made to the dependent survivors of insured persons or of pensioners.

In its application to mothers and children the law provides medical assistance and medicines, including serums and vaccines for the insured man's wife and his children under 7. This assistance may be extended to children between 7 and 14 years, and dental treatments may be added, on the decision of the governing board of the social-insurance fund of Costa Rica.

Insured women receive in case of illness cash benefits of 40 to 50 percent of their wages or salary, medical care, and medicines. Expectant mothers must ask for medical examination at least 4 months before the expected date of confinement and from that time must present themselves regularly for examination and follow the physician's instructions. Medical care and medicines are provided during pregnancy and afterward, and obstetric attendance either in the woman's home or in a hospital.

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Cash payments of 50 percent of the insured woman's wages or salary are made for 72 days including the time before and after childbirth, provided the woman refrains from paid work during that time. Milk is supplied without additional charge for the babies of women who are unable to nurse them. All benefits are paid irrespective of the legitimacy or illegitimacy of the child's birth, but on condition that the woman attend regularly a prenatal and postnatal clinic and a child-health center, as prescribed by the regulations of the social insurance fund and that she follow the physician's instructions. The fund is authorized by law to extend obstetric care to the wives of insured men.

Like the social insurance law of Chile, that of Costa Rica prescribes a preventive medical service with regular compulsory examinations of the insured persons in order to discover latent disease; persons with venereal diseases or tuberculosis are required to undergo treatment. Those who in the course of an examination are found to be in need of a rest without being ill will be subject to the same rules as ill persons, that is, they will receive medical treatment if necessary and 40 to 50 percent of their wages if they stop working.

The social insurance fund will employ social workers for visiting the homes. Inspectors will be employed by the fund for enforcing the law.

Reserve funds are to be invested in the construction and equipment of maternity homes, sanitariums, clinics, health centers, and houses for workers; they are also to be used for disease prevention and other social-welfare work.

San Seguridad, Organo Oficial de la Caja Costarricense de Seguro Social, San José de Costa Rica, Nos. 1 and 2, 1942.

Instruction in Child Care in Peru

By an order of the President of Peru of December 1, 1941, the National Bureau of Public Health was authorized to establish a Center of Mothers' Education (Centro de Educación Maternal) where mothers will be taught hygiene and where the health of well children will be supervised, and measures will be taken for the prevention of communicable diseases among children. This center is to be a part of the National Institute of the Child (Instituto Naci-

onal del Niño), official national agency in charge of health work for mothers and children.

A definite sum was assigned out of available funds for the installation of the center; and the Minister of Public Health, Labor, and Social Welfare was ordered to include in the budget of the National Institute of the Child for 1942 an appropriation for the functioning of the Center of Mothers' Education.

On December 6, 1941, the President of Peru ordered that instruction in child care be added to the curriculum of the teacher-training schools for girls, so as to enable the girls to teach this subject.

A recommendation was also made to the Bureau of Physical Education and School Hygiene to organize extension courses on this subject, for the same purpose, for women teachers in secondary schools and high schools, whether public or private.

Boletín del Instituto Nacional del Niño, October-December 1941, pp. 4-5.

Mother's and Child's Week in Mexico

For the purpose of arousing in the people a greater interest in child health and in the reduction of infant deaths, Mother's and Child's Week was celebrated, May 4-10, 1942, throughout Mexico, on the initiative of the Federal Department of Health.

In Mexico City lectures and brief talks on maternal and child health with demonstrations were given every day in all clinics, health centers, mothers' clubs, and many business and industrial establishments. Special lectures were given on tuberculosis among children. Information on maternal and child health was also given during the week over the radio and through the press. Various celebrations were held in the kindergartens and schools. All Government departments and many private organizations cooperated in this work.

Immunization treatments against smallpox, diphtheria, and typhoid were given to all persons asking for them, and Wassermann tests were given to expectant mothers.

As a part of the celebration the National Museum of Hygiene was established by the Federal Bureau of Health Education (Dirección General de Educación Higiénica). Lectures on health were given at the museum by physicians every day during the celebration.

—El Popular, Mexico, May 5-9, 1942.

• EVENTS OF CURRENT INTEREST •

New Education Fellowship Adopts Statement on Child Rights

At the interallied conference of the New Education Fellowship, which met in London April 11 and 12, 1942, a charter for children was adopted as a statement of the basic and minimum rights of children. This statement places "above and beyond all considerations of sex, race, nationality, creed, or social position" the following rights of children:

1. The personality of the child is sacred; and the needs of the child must be the foundation of any good educational system.
2. The right of every child to proper food, clothing, and shelter shall be accepted as a first charge on the resources of the nation.
3. For every child there shall always be available medical attention and treatment.
4. All children shall have equal opportunity of access to the nation's store of knowledge and wisdom.

5. There shall be full-time schooling for every child.
6. Religious training should be available for all children.

Copies of the statement were sent to the Governments of the United Nations and to educational associations. A reasoned statement on the detailed points of administration was to be drawn up by the drafting committee of the conference.

—*Times Educational Supplement*, London, April 8, 1942, p. 186.

Blue Ridge Institute

Social Breakdown in Time of War is the general theme of the Blue Ridge Institute for Southern Social Work Executives, July 27-31 at Black Mountain, N. C. The institute is held by Community Chests and Councils (155 East Forty-fourth Street, New York).

CONFERENCE CALENDAR

Aug. 17-21	National Medical Association. Forty-eighth annual session, Cleveland. Permanent headquarters: 4655 South Michigan Avenue, Chicago.	Oct. 5-9	National Safety Council. Thirty-first National Safety Congress, Chicago. Permanent headquarters: 20 North Wacker Drive, Chicago.
Aug. 24-28	American Dental Association. Eighty-fourth annual session, Boston. Permanent headquarters: 212 East Superior Street, Chicago.	Oct. 12-16	American Hospital Association, St. Louis. Permanent headquarters: 18 East Division Street, Chicago.
Sept. 28-Oct. 2	National Recreation Association. Twenty-seventh National Recreation Congress, Cincinnati. Permanent headquarters: 315 Fourth Avenue, New York.	Oct. 27-30	American Public Health Association. Seventy-first annual meeting, St. Louis. Permanent headquarters: 1790 Broadway, New York.

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